MISSOURI DEPARTMENT OF NATURAL RESOURCES HISTORIC PRESERVATION PROGRAM SECTION 106 PROJECT INFORMATION FORM

Submission of a completed Project Information Form with adequate information and attachments constitutes a request for review pursuant to Section 106 of the National Historic Preservation Act of 1966 (as amended). We reserve the right to request more information. Please refer to the CHECKLIST on Page 2 to ensure that all basic information relevant to the project has been included. NOTE: Section 106 regulations provide for a 30-day response time by the Missouri Historic Preservation Program from the date of receipt.				
PROJECT NAME & NUMBER				
FEDERAL FUNDING OR PERMITTING AGENCY				
APPLICANT	TELEPHONE			
CONTACT PERSON	TELEPHONE			
ADDRESS FOR RESPONSE				
LOCATION OF PROJECT				
COUNTY				
GIVE LEGAL DESCRIPTION OF PROJECT AREA (TOWNSHIP, RANGE, SECTION, SECTION ETC.) OR STREET ADDRESS IF APPLICABLE				
	SECTION:			
OR STREET ADDRESS: CITY:				
OTT.				
PROJECT DESCRIPTION				
PROJECT DESCRIPTION This project involves: Archaeology/Earthmoving Activities Structure	res BOTH			
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This project involves: Archaeology/Earthmoving Activities Structu	e project involves demolition, make that clear.			
This project involves: Archaeology/Earthmoving Activities Structure (Complete appropriate section(s) below) Describe the project in detail. If it involves digging, indicate how wide, how deep, etc. If the	e project involves demolition, make that clear.			
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ARCHAEOLOGY (Earthmoving Activities)				
Has the ground involved been farmed, graded, built on, or p Please describe in detail: '(Use additional pages, if neces				
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Will the project require fill material? Indicate proposed borrow areas (source of fill material) of	Yes n topographic map.		No	
Are you aware of archaeological sites on or adjacent to projet lf yes, identify them on the topographic map.	ect area?		Yes	No
STRUCTURES (Rehabilitation, Demolition, Additions to	, or Construction near exi	sting	structures)	
To the best of your knowledge, is the structure located in a:				
Previously Surveyed Area	ational Register District		Local Historic District	None
For each structure over 50 years old, complete an Historic (See photography requirements below		and a	attach photograph.	
For all other structures, including outbuildings, provide photographs. NOTE: All photographs should be labeled and keyed to one map of the project area.				
ADDITIONAL REQUIREMENTS				
Map Requirements: Attach a current USGS 7.5 min. topographic map and, if necessary, a large scale project map. Please do not send an individual map with each structure or site. While an original map is preferable, a good copy is acceptable. USGS 7.5 min topographic maps may be ordered from: Division of Geology and Land Survey, Department of Natural Resources, 111 Fairground, Rolla, MO 65402, Telphone: 573/368-2125.				
Photography Requirements: Clear black and white or color photographs (minimum 3" x 5") are acceptable. Good quality photographs are important for expeditious project review. Photographs of neighboring or nearby buildings are also helpful.				
CHECKLIST: Did you provide the following information	?			
Topographic map 7.5 min (per project, not structure)			Other supporting docu project)	uments (if necessary to explain the
Thorough description (all projects)			For new construction writeups, plans, draw	, rehabilitations, etc., attach work ings, etc.
Photographs (all structures)			Is topographic map io	dentified by quadrangle and year?
Historic Property Information Form (All structures over 50 years old; bridges require a separate form)				
Return this Form and Attachments to:				
M HI Af P.	SSOURI DEPARTMEN STORIC PRESERVAT tn: Review & Compli O. BOX 176 EFFERSON CITY, MIS	NT O ION I ance	F NATURAL RES PROGRAM	OURCES

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